

Kern County Supervisors and Their Supporters Propose a Constitutional Amendment: To Open County Hospitals to Both Indigent and Non-Indigent Citizens.—Witness in this connection, the following excerpts from *The Bakersfield Californian* of April 4, 1936:

PETITIONS DEMAND VOTE ON KERN AND STATE
HOSPITAL ISSUE

Hospitalization on Pay Basis Is Urged By Group

Petitions asking that a proposed change in the Constitution of California, which would allow county hospitals to accept non-indigent patients, be submitted to the voters are being circulated throughout California by members of various civic, labor and farm organizations, it was learned today. The petitions have their origin in Kern County, where the Kern General Hospital Protective League has led the state-wide fight for public hospitalization in county hospitals.

MANY IN FAVOR

Thousands of signatures already have been affixed to the petitions, attesting the favor with which the proposed initiative measure is viewed by the electors, according to proponents of the move.

The Attorney-General has summarized the proposed measure as follows:

Establishment and maintenance of hospitals for pay patients by political subdivision. Initiative constitutional amendment. Authorizes the governing body of any city, county, or city and county, to establish and maintain a hospital for the care and treatment of any resident thereof whether an indigent or non-indigent, and to enact rules prescribing the rates to be charged each resident, other than indigents, for hospital services and supplies.

THEME OF PETITIONS

The petitions are addressed to the Secretary of State of the State of California, and read:

We, the undersigned, registered qualified electors of the State of California, residents of Kern County, present to the Secretary of State this petition and hereby propose an amendment to the Constitution of the State of California by adding Section 21 to Article XI thereof, to read as hereinafter set forth in full, and petition that the same be submitted to the electors of the State of California for their adoption or rejection at the next succeeding general election or as provided by law.

The petitions then continue and set forth in technical terms the proposed section as interpreted above by the Attorney-General.

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The Proposed Law Would Be an Amendment to the Constitution of the State of California.—If the proposed constitutional amendment, title printed above, is to have a place on the November, 1936, ballot, a total of 186,000 validated names of voters must be attached to its initial petition, and these are required to be in the hands of the Secretary of State at least 110 days before the November, 1936, election. Under existing economic conditions and with the present temper of many voters, it is quite possible that the number of signatures needed may be secured. If so, the members of the medical profession will have before them, in the months up to the November election, a real and serious task. Of that, however, more later on, in case the initiative petition actually finds a place on the November ballot.

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Component County Societies and Legislative Candidates.—In the meantime, it is to be hoped that component county societies will be fully alert to their responsibilities prior to, and in the near-

at-hand primary elections, and that members throughout the State will give consideration and support only to those legislative candidates, for either Senate or Assembly, who are known to have sound opinions on public health matters. Physicians are citizens and taxpayers. They owe it to themselves, in virtue of their special qualifications and calling, to inform their lay fellows, in proper, diplomatic fashion, concerning the importance of electing only those senatorial and assembly candidates whose past records indicate that they will support sane and legitimate public health measures. This is our immediate duty. And it should be remembered that in California, even though the large cities have a preponderance of power in the lower house or Assembly, the smaller and rural counties are in position to exercise as great or even greater legislative influence, because of their larger proportion of state senators.

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Component County Societies Have an Immediate Duty Facing Them.—The members of every component county society, and the officers especially, thus have in all this matter a serious and important obligation. Now is the time, therefore, to delegate to standing or special committees the work of contacting legislative candidates so that the information so gained may be given, not only to fellow physicians, but to patients and to those other citizens who likewise have the welfare of the State and its many economic, social welfare and public health activities truly at heart.

MEDICAL HISTORY THAT IS NOT HISTORY: COMMENT ON A LAY JOURNAL'S MISSTATEMENT OF CALIFORNIA MEDICAL ASSOCIATION ACTIVITIES

April 20 Issue of "Time" Discourses, Not Learnedly but Otherwise, on Medicine.—The weekly magazine *Time*, in the "Medicine" department of its issue for April 20, 1936, has as an opening article, "Pre-Convention [A. M. A.] Problems," in which the California Medical Association and the names of several of its members are mentioned. Every sentence of the third and fourth paragraphs may be pronounced a glaring misstatement of fact—whether made through ignorance, or by intention, we do not know.

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The First and Second Paragraphs.—The opening paragraph is as follows:

The American Medical Association will meet in Kansas City next month. Some seven thousand United States doctors will attend that annual convention. But only 172 members, delegates for the 101,754 American Medical Association members, will have anything authoritative to say, and that only between the authoritative gavel bangings of the Speaker of the House of Delegates, 70-year-old Dr. Nathan Bristol Van Etten of the Bronx.

The second paragraph, referring to the annual reports in a recent issue of the *Journal of the American Medical Association*, quotes some of Secretary Olin West's reports on certain American Medical Association work.

The Misstatements of the Third and Fourth Paragraphs.—The declarations made in the third and fourth paragraphs are so widely and so surprisingly at variance with actual facts that they are considered below, sentence by sentence, our comments following:

Long-time predecessor of Dr. Van Etten as Speaker of the American Medical Association House of Delegates was Dr. Frederick Cook Warnshuis. Disaffection among American Medical Association delegates and officers plus his own ill health cost Doctor Warnshuis his job. When he took the secretaryship of the California Medical Association, American Medical Association headquarters in Chicago expected him to control that State's alarming tendency toward socialized medicine.

To every member and fellow of the American Medical Association who is at all familiar with the national organization, and its constituent state medical associations, this statement that American Medical Association headquarters in Chicago "expected Doctor Warnshuis to control the California Medical Association's alarming tendency toward socialized medicine," sounds for what it is, namely, a gross absurdity. The officers of the American Medical Association at Chicago and elsewhere would not be holding their positions in the American Medical Association, if they believed that it was possible for any one man to control a state medical association's policies, particularly, as in this instance, California, with its 5,397 members, making it the fourth largest state medical society in the United States. The secretary of the California Medical Association, Doctor Warnshuis, certainly holds no such silly notion, nor do the members of the Council who elected him; and our personal acquaintance with most of the officers of the American Medical Association at Chicago, extending over many years, permits us to affirm that those colleagues likewise hold no such ridiculous thought.

But Doctor Warnshuis was unable to prevail against Dr. Walter Bernard Coffey, pugnacious chief surgeon of the Southern Pacific Railroad, who bosses the politicians who control the practice of medicine in California.

We cannot conceive from what source the medical editor of *Time* picked up the preposterous idea quoted above. In the first place, the practice of medicine in California is governed by the State's Medical Practice Act. Each of the members of the California Medical Association avails himself of his right to practice medicine, as in his own judgment seems best, in conformity with the state's legal enactments. Secondly, Dr. Walter B. Coffey of San Francisco is not at the present time, nor for almost ten years has he been, an officer of the California Medical Association. It may be added that throughout the State, there are a rather large number of California Medical Association members, who in recent years have taken a greater and much more active part than his, in the consideration and determination of the present policies of the California Medical Association; which policies, by the way, are laid down, not by him or any other man, but by the House of Delegates (one delegate for every fifty members in a component county society of the California Medical Association),

and by its Council of nine district councilors (three elected each year, for three-year terms), and six councilors-at-large (two elected each year for three-year terms), and seven general officers (elected each year). Most of the delegates and practically every one of these councilors have had years of organization experience behind them.

What an irrational statement, then, even to suggest that Doctor Coffey directly or indirectly controls, through the delegates and councilors, or through any other persons, the practice of medicine in California! If the proprieties of the printed word permitted, it might be possible to give expression to one's opinion of such unreasonable prattle, and of the person who would have the temerity so to chatter.

Results: The California Medical Association last year practically bolted from the American Medical Association.

The California Medical Association was represented at last year's session in Atlantic City by seven delegates, to whom, individually and collectively, such a conception as given above never occurred. The California Medical Association delegates were interested and active participants in the proceedings of the House of Delegates up to the very moment of its adjournment. To talk, therefore, about California as "practically bolting," is ludicrous, and then some.

The American Medical Association refused to elect a California doctor as trustee.

Two trustees were elected last year, one from Oregon and one from West Virginia, so that the Association's choice could be twisted to reflect upon all the other states in the union. It is certainly the right of the American Medical Association House of Delegates to decide from what states the trustee members of the national organization shall come, and who they shall be, so that the inuendo probably intended, is decidedly out of place.

Eleven thousand California doctors have virtually no say concerning the practice of their profession.

"Inaccurate and incongruous" must be the verdict of California physicians on reading such palpable nonsense. The Board of Medical Examiners of the State of California carries on its roster the names of 10,490 licensed physicians, of whom 5,397 are members of the California Medical Association. Of the nonmembers, several thousand are elderly physicians who have come to California to spend their remaining years, and who are so little in active practice that they may be said to be virtually on the retired list. California membership studies made in recent years reveal the fact that only about 1,200 of the nonmembers would be eligible for admission to the Association, and that with many of these, financial and other good reasons account for their nonaffiliation. However, both members and nonmembers of the California Medical Association have very much to say about the practice of their profession, and they carry on their work, both individually and

collectively, as they see fit, without let or hindrance, except as they violate the provisions of the medical practice act of the State, or commit gross breaches of ethical conduct; in which latter instance they lay themselves liable to citation before the constituted authorities of their fellows, to explain why they choose to jeopardize the scientific and ethical standards of their guild, and its capacity to adequately serve the people.

During the past year these changes affecting the California carbuncle on the body of the American Medical Association have occurred: The American Medical Association has become more lenient toward California experiments in the relation of doctor to patient; California doctors were scared away from drastic changes in ethics by Upton Sinclair's EPIC. Doctor Coffey hopes that by "playing ball" with the American Medical Association that organization will fulfill his dearest wish and agree that he has cured many a case of cancer with hypodermic injections of extracts of adrenal cortex.

"California carbuncle" must be put down as strained effort of cheap and inapt smartness, to which a number of "*Time's* editors, ablest historians of our day" (if one may refer to the radio laudations of their merits), seem obsessively addicted.

We believe that the California Medical Association, one of the largest and best organized constituent state associations of the American Medical Association, far from being a carbuncle on the body of the national organization, is a state unit of which the American Medical Association is and has just right to be proud.

The "leniency of the American Medical Association toward California experiments in the relation of doctor to patient" is a nonsensical statement, because the national organization is too busy with its own important work to meddle with a state unit's studies of the attitude of physicians to their patients.

When the "able historian" who conducts the "Medicine" department of *Time* has the presumption to print, "California doctors were scared away from drastic changes in ethics by Upton Sinclair's EPIC," his superficial and senseless twaddle are more obvious than ever.

Why Doctor Coffey should be dragged in by *Time*, as in the concluding sentence of the last quotation, is beyond our ken, and to every member of the California Medical Association who knows aught about its organization work, or that of the American Medical Association, the reference must sound like mere moonshine and balderdash.

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Question Arises of Diagnosis of the Mental Condition of the Magazine's "Medical Editor."

—Within a day or two after the issue of *Time* for April 20 reached California, several colleagues called our attention to the article quoted, on which these comments are now made. If *Time* were a publication of lesser circulation, it would be questionable whether any statement, in relation to the California Medical Association and several of its members, would be deserving of the space here given. When one remembers, however, the emphasis

which radio announcers place on the so-called accuracy of "*Time's* editors, the ablest historians of our day," then the declarations seemingly made in great earnestness by that magazine's contributor or editor on matters medical, must amuse California and other physicians—who actually know a good deal about the matters discussed—as being little less than farcical and laughable. We would observe also that, if we felt the statements made in other departments of that publication were as far from the truth as are those to which our remarks are directed, we should promptly cancel our own subscription, and quite as quickly cut off the broadcasted "March of *Time*" if, by chance, the radio brought it to our ears.

However, *Time's* "medical editor," when "up against it" for copy, may have been indisposed through illness—or, who knows, for some other cause—or may even have been absent from his desk, making it necessary for friend or office boy to "pinch-hit" and help him out; for any one of which or similar reasons, he might possibly be excused. Nevertheless, in future the articles on "Medicine" in *Time* are such babblings as those excerpted, then we shall religiously avoid perusing the stuff, although presuming that the magazine hires the "medical editor" to portray the medical history of the day, and in far better form than that to which expression is given in the periodical's issue of April 20.

Other State Association and Component County Society News.—Additional news concerning the activities and work of the California Medical Association and its component county medical societies is printed in this issue, commencing on page 407.

EDITORIAL COMMENT†

ARTIFICIAL FEVER AS A THERAPEUTIC PROCEDURE

The use of artificially produced fever has become an established therapeutic procedure for the treatment of certain diseases. There is a constantly growing list of conditions for which pyrotherapy has proved beneficial. It is of particular value in the treatment of syphilis of the central nervous system, especially paresis, tabo paresis, and tabes dorsalis. In other forms of neurosyphilis which fail to respond to drug therapy, artificial fever is a valuable adjunct. Fever therapy is indicated in gonorrheal arthritis, epididymitis, and resistant urethral and prostatic infections. The effects upon gonorrheal arthritis are striking, the pain and swelling responding promptly. In other types of arthritis, in multiple sclerosis and leprosy, irregular results have been noted with

† This department of CALIFORNIA AND WESTERN MEDICINE presents editorial comment by contributing members on items of medical progress, science and practice, and on topics from recent medical books or journals. An invitation is extended to all members of the California and Nevada Medical Associations to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.